## PART B -FEE(S) TRANSMITTAL

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or Fax (571) 273-2885 INSTRUCTIONS This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 45070 PERKINS COIF LLP Certificate of Mailing or Transmission P.O. Box 1247 I hereby certify that this Fee(s) Transmittal is being e-filed on the date indicated Seattle, Washington 98111-1247 below. Arcelie Grapes (Depositor's na (Signature (Date FIRST NAMED INVENTOR CONFIRMATION NO. APPLICATION NO. FILING DATE ATTORNEY DOCKET NO 10/777.732 02/12/2004 Brent Gilbert 418268834US 5621 TITLE OF INVENTION: MANAGING GRAPHIC DATABASES APPLN, TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE Non-Provisional \$1,510,00 \$300.00 \$1,810.00 03/10/2010 EXAMINER ART UNIT CLASS-SUBCLASS M. M. Pvo 2161 1. Change of correspondence address or indication of "Fee 2. For printing on the patent front page, list Perkins Cole LLP Address" (37 CFR 1.363). (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of (2) the name of a single firm (having as a member Correspondence Address form PTO/SB/122) attached. a registered attorney or agent) and the names of "Fee Address" indication (or "Fee Address" Indication up to 2 registered patent attorneys or agents. If no form PTO/SB/47; Rev 03-02 or more recent) attached. name is listed, no name will be printed. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Microsoft Corporation Redmond Washington Please check the appropriate assignee category or categories (will not be printed on the patent); Individual X Corporation or other private group entity Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): x Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by EFT Account SEA12PIRM x The Director is hereby authorized to charge any deficiencies or credit any overpayment to Advance Order -# of Copies Deposit Account Number 50-0665 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. 1.11.10 Authorized Signature 65.049 Typed or printed name Jessica M. Mevers Registration No.